

Charles A. Bon
Patological Specimens

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FOIA-875)

SERIAL NO.

101070405

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4	1					
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48		1				
49		1				
50		1				
TOTAL IND.	4		4		4	
TOTAL DEP.		1		1		1
TOTAL CLAIMS	4	1	4	1	4	1

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						